

KIDSNET UPDATE

RHODE ISLAND'S INTEGRATED CHILD HEALTH INFORMATION SYSTEM

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JANUARY / FEBRUARY 2017

TESTIMONIAL

"CCA family visiting programs use KIDSNET every day. It helps us find families and connect with other providers serving families – it's like wearing a Sherlock Holmes detective cap!"

Darlene B. Magaw, MS Family Support Director, Community Care Alliance



DATA CORNER: DEVELOPMENTAL SCREENING

Developmental screening data are reported to KIDSNET from the Child Outreach Program, family visitors, and from some primary care providers. In 2016, 11,989 children had at least one Survey of Well Being in Young Children (SWYC) result reported to KIDSNET. KIDSNET also has results from the 13,822 three to five year olds screened by Child Outreach during the 2015-16 school year.

CEDAR FAMILY CENTER PARTICIPATION IS NOW IN KIDSNET

Cedar Family Centers provide family-centered, intensive care coordination for children and youth with special health care needs (ages birth-21). Child Eligibility includes two or more chronic conditions or one chronic condition with risk of developing a second, and/or severe mental illness or emotional disturbance. Cedar Family Centers assist families with obtaining clinical services, referrals to community and social supports, health promotion, screening for physical and mental health, transitional care, and family advocacy. There are no out of pocket charges for these services for children with Medical Assistance coverage (Medical Assistance, Rite Share). Families do not need a referral but health care providers can make referrals on a family's behalf.

Enrollment information for Cedar Centers is now available in KIDSNET for three of the four Cedar Centers in Rhode Island. Many KIDSNET users (including Early Intervention, family visitors, WIC, healthcare providers, school nurses, and DCYF) can now view this information for children under 18 and reach out to the Cedar Center for care coordination. As with all programs, the Cedar label in the left-hand menu bar will not be grayed out if there is viewable information. Scroll down and click on "Cedar" to see which Cedar Family Center serves the child. The KIDSNET training team will demonstrate this new KIDSNET page and, as always, is available to answer any questions.

2016 KIDSNET ACCOMPLISHMENTS

2016 was a busy year for the KIDSNET team. In addition to routine maintenance and enhancements to existing functionality, some key accomplishments were added or developed:

- An online training for KIDSNET users was developed and pilot tested – soon access will be available via the left-hand menu bar in KIDSNET
- The capacity to select by age in years and download data from web reports
- A new report listing children in need of developmental screening
- Electronic transfer of newborn hearing screening data from hospital screening equipment
- Capacity to upload Asthma Action Plans to the asthma web page
- Transfer, display reports of new family visiting program information (Nurse Family Partnership, Parents as Teachers, Healthy Families America)

- A school-based Dental Sealant Program database within
- A fillable PDF for the "Personal School Form"
- Monthly data exchange between RI Department of Education and KIDSNET for early childhood screening and health data as well as school roster data
- Web pages for Head Start and Cedar Family Center participation
- CPT codes converted to the national standard CVX
- 8th grade school-ready indicator added to the immunization web page
- Automated emails for electronic immunization transmissions
- Invoices for Medicare Fee For Service flu doses generated from online vaccine ordering system

KIDSNET VS. OSMOSSIS REPORTING OF IMMUNIZATIONS

There has been some confusion regarding the KIDSNET system and the OSMOSSIS Reporting of Immunizations system. Here are some clarifications regarding reporting to KIDSNET vs. reporting to OSMOSSIS:

- Vaccine administration data reported to KIDSNET updates patient records in KIDSNET only
 - KIDSNET reporting does not impact vaccine ordering at this time
- Vaccine data reported in OSMOSSIS are for inventory tracking only
 - For monthly vaccine orders, "Calculated Doses Administered" in OSMOSSIS is a calculation based on:
 - Shipments received to date
 - Plus: Transfers in
 - Less: Transfers out, waste/returns, and inventory on-hand
 - For influenza vaccine orders, "Calculated Doses Administered" in OSMOSSIS is a calculation based on:
 - Shipments received to date
 - Plus: Transfers in
 - Less: Transfers out, waste/returns, inventory on-hand, and previously reported doses administered

QUALITY IMPROVEMENT (QI) PROJECTS

Data quality reports are periodically generated in KIDSNET to ensure that immunizations reported are accurate. Further research is done on records that appear to have inaccurate information in order to correct the errors.

One data quality report that is generated identifies if a child has more than 70 vaccine records regardless of age. If a child has more than 70 records, we investigate the possibility that two records were accidently merged into one. If this is the case, corrective action is taken to unmerge these records.

Non-Hepatitis B vaccines administered at birth are also being closely monitored and are being deleted if submitted in error. Recently, a QI report was generated identifying a vaccination encounter before the patient's date of birth. The initial report produced around 150 records. Corrective action was taken: date of birth was verified and vaccine encounters were deleted, if necessary.

These QI reports will be generated quarterly to ensure data quality. QI team meetings are held on a regular basis to discuss any trends.

VACCINE FOR CHILDREN (VFC) ELIGIBILITY CODES ERRATUM

Eligibility for VFC vaccine must be assessed and recorded in the medical record based on the categories listed below. The information is also required in the electronic messages for newly administered vaccines that are sent to KIDSNET.

For categories V02 – V05: The individual must also be younger than 19 years of age and the administered vaccine must be eligible for VFC funding.

Code	Category	Description
V01	Not VFC eligible	Patients with private insurance. Patient does not qualify for VFC because they do not have one of the statuses below. (V02-V05)
V02	VFC eligible – Medicaid/Medicaid Managed Care	Patient is currently eligible for Medicaid or Medicaid managed care (RIteCare)
V03	VFC eligible – Uninsured	Patient does not have health insurance
V04	VFC eligible – American Indian/Alaska Native	Patient is a member of a federally recognized tribe
V05	VFC eligible – underinsured at FQHC	Patient has insurance but insurance does not cover vaccines, limits the vaccines covered, or caps vaccine coverage at a certain amount and patient is receiving care at an FQHC